

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE		Crom'	
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement of	0210700 10	M.I.
1. Committee I.D. Number	4. Candidate Las		
	Terry	Clifford	W
138032	4a. Office Sought I	ncluding District # or Community Served (if applicable))
2. Committee Name	Board of Educ	ation - Warren Consolidated Schools	,
Friends of Clifford Terry	4b. County of Resid		
5. Committee's Mailing Address	6. Treasurer's Nam	ne & Residential Address	
33196 Priehs Ct.	Jennifer Ten	γ	
Sterling Heights, MI 48310	33196 Prieh	s Ct. 국兴,	<u>്</u> സ്
Sterming Florightes, with 1997	Sterling Heig	ghts, Mi 48310	C
		(97)	Č.
(586) 405-2602		EN CONTRACTOR	2.5°C
Area Code and Phone (586) 405-2602			23
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phon	e (586) 405-2602	
7. Treasurer's Business Address	8. Designated Re Designated Reco	cord keeper's Name and Mailing Address (If the commod keeper)	
	John Cafagr	na ZPS	Ć
	41943 Mont	De	#85555AA#
		ghts, MI 48313	****
	Sterning men	giste, Wil Too To	
		(586) 731-7871	
Area Code and Phone	Area Code and P	hone (300) 10111011	
9. TYPE OF STATEMENT			
		9c. Annual Statement (Coverage Y	(ear)
9a. Pre-Election OR 9b. Pos	t-Election	———	
		9d. Amendment to Campaign Statement (Compl or 9e to indicate which Statement is being ar	ete Item 9a, 9b, 9c
Pre-Election or Post-Election Statement relates to:		or 9e to indicate which Statement is being an	ueugeg)
1 15-Clotholi of 1 of Clotholi		9e. Dissolution of Candidate Committee	
Primary	neral		
	11	Effective Date of Dissolution	
☐ Convention ✓ Sc	hool		
	ucus		har an occasio or
Special Car	4043	By checking this item, I\We certify that the committee outstanding debts, Including late filing fees. Further,	I/VVe request that ii
Date of Floriday Convention of County		the dissolution cannot be granted, that this be considered.	lered a request for
Date of Election, Convention or Caucus		the Reporting Waiver.	
05/06/08		Note: The disposition of residual funds must be repo	rted our deliledrate
Male Male and File all	required Campaign 5		all applicable
A committee that does not have a Reporting Waiver must file all s Schedules. Direct contributions, in-kind contributions, loans, exp	enditures, and outst	anding debts count against the \$1,000 Reporting Walt	rer threshold. ganization, an
Schedules. Direct contributions, in-kind contributions, loans, exp if any of the information listed in items 2, 4, 5, 6, 7, or 8 has chan amendment to the Statement of Organization should accompany before the filing deadline of a required campaign statement,	ged since the interm this Campaign State	ement. If a request for a Reporting Walver is not re	ceived on or
before the filing deadline of a required campaign statement,	that campaign stat	ement cannot be waived.	to the best of
Verification: IVVe certify that all reasonable diligence was used my/our knowledge and belief the contents are true, accurate and contents.	d in the preparation (of this statement and attached schedules (ii any) and i	
my our knowledge and ballet the contents are traction	1/2	/ , V _	
current Treasurer or John Cafagna	, C BY	Date 6	/5/08
Designated Record keeper	Signature	1/1/	
Type of Fills Marile	NA	11//\///	VE100
Clifford Terry	(SUM	Date	3/5/08
Candidate	Signatur		
Type or Print Name			

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDIII F 1A

1. Committee I.D. Number	138032
1. Committee i.D. Maillipei	

	SCHEDUL		F	riends of Clifford	Terry
	ANDIDATE C		2. Committee Name		
Enter contributor's name middle initial. Check bo Committee (PAC) Repo	v to indicate if contri	ontribution is from an individual, ibution is from a Political Comm egardless of amount.	enter last name, first name, nittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date of Rece	o3/01/08		
FRIENDS OF FF PO BOX 46274 MOUNT CLEME		6		_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cum				Click Here f	or Memo Itemization
Occupation		_ Employer		-	
Business Address					
Type of Contribution:	√ Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt7	YES 4. Date of Rece	eipt		
				\$	5
5. If over \$100.00 cum	ulative, please prov	vide:		Click Here fo	or Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of Rec	eipt		
				\$	_ s
5. If over \$100.00 cum	ulative, please pro	vide:		Click Here fo	or Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		<u> </u>
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of Re-	ceipt		
				æ	er.
				Ф <u> </u>	
5. If over \$100.00 cum	ulative, please pro	ovide:		Click Here fo	or Memo Itemization
Occupation		Employer		_	
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser Page Sub	ototal \$100.00	
			_	V 1.00.00	-
			Grand Total of All Schedules inplete on last page of Schedules	dule) —————	
4 00		•••	•	line 3a of Summa	гу
Page 1 of 22	_			Page.	

ITEMIZED CONTRIBUTIONS **SCHEDULE 1A** CANDIDATE COMMITTEE

1. Committee I.D. Number 138032 2. Committee Name Friends of Clifford Terry

inter contributor's flame and niddle initial. Check box to committee (PAC) Report <u>al</u>		stribution is from an individe oution is from a Political Co gardless of amount.	mmitte	se or an Independent	6. Amount	Election Cycle for Each Contributor (Through date of receipt)
	PAC Receipt?		eceipt	03/27/08		
rme & Address:	, L	_				
tobert Goolsby					20.00	₂ 30.00
5319 Masch					_{\$} 30.00	_ \$
Varren, MI 48091					an Litter	for Mama Hamization
If over \$100.00 cumulat	ive, please prov				Click Here	for Memo Itemization
ccupation		Employer				
usiness Address		 -				
ype of Contribution:	Direct	Loan from a person	✓	Fund Raiser		
	PAC Receipt?	YES 4. Date of R	eceipt	t		
me & Address		ل مم				
					\$	\$
if over \$100.00 cumulat	tive, please prov	ide:			Click Here	for Memo Itemization
		Employer				
ccupation						
usiness Address						
ype of Contribution:	Direct	Loan from a person	<u>ليا</u>	Fund Raiser		<u> </u>
Contribution # 3 arne & Address:	PAC Receipt?	YES 4. Date of	,,,,,,,,,,			
					\$	<u> </u>
					\$Click Here	\$for Memo Itemization
	ative, please prov	vide:			\$Click Here	\$for Memo Itemization
i. If over \$100.00 cumula					\$Click Here	\$for Memo Itemization
. If over \$100.00 cumula					\$Click Here	s for Memo Itemization
. If over \$100.00 cumula Decupation				Fund Raiser	\$Click Here	\$for Memo Itemization
i. If over \$100.00 cumula Decupation Business Address Type of Contribution:	Direct	Employer		Fund Raiser	\$Click Here	sfor Memo Itemization
. If over \$100.00 cumula Decupation Business Address Type of Contribution:		Employer		Fund Raiser	\$Click Here	5 sfor Memo Itemization
If over \$100.00 cumula Occupation Susiness Address Type of Contribution:	Direct	Employer		Fund Raiser	\$Click Here	for Memo Itemization
. If over \$100.00 cumula Occupation Jusiness Address Type of Contribution:	Direct	Employer		Fund Raiser	\$Click Here	\$for Memo Itemization
. If over \$100.00 cumula Occupation Jusiness Address Type of Contribution:	Direct	Employer		Fund Raiser	ss	
. If over \$100.00 cumula Decupation Business Address Type of Contribution: Contribution # 4 lame & Address	Direct PAC Receipt?	Loan from a person YES 4. Date o		Fund Raiser	ss	for Memo Itemization \$ for Memo Itemization
. If over \$100.00 cumula Decupation Business Address Type of Contribution: Contribution # 4 lame & Address	Direct PAC Receipt?	Employer Loan from a person YES 4. Date o		Fund Raiser	ss	\$
. If over \$100.00 cumula Decupation Business Address Type of Contribution: Contribution # 4 lame & Address	Direct PAC Receipt?	Loan from a person YES 4. Date o		Fund Raiser	ss	
If over \$100.00 cumular Decupation Itsiness Address Type of Contribution: Contribution # 4 ame & Address If over \$100.00 cumular Occupation	Direct PAC Receipt?	Employer Loan from a person YES 4. Date o		Fund Raiser	ss	\$
If over \$100.00 cumula Docupation Usiness Address Type of Contribution: Contribution # 4 ame & Address	Direct PAC Receipt?	Employer Loan from a person YES 4. Date o		Fund Raiser	\$Click Here	
If over \$100.00 cumular Docupation usiness Address Type of Contribution: Contribution # 4 ame & Address If over \$100.00 cumular Occupation	Direct PAC Receipt? ative, please pro	EmployerLoan from a person YES 4. Date o vide:Employer		Fund Raiser	\$Click Here	
If over \$100.00 cumular Decupation Business Address Type of Contribution: Contribution # 4 lame & Address If over \$100.00 cumular Occupation Business Address	Direct PAC Receipt? ative, please pro	Employer Loan from a person YES 4. Date of the control of	f Rece	Fund Raiser Fund Raiser Page Subtota	\$S_0.00	
i. If over \$100.00 cumula Decupation Business Address Type of Contribution: i. Contribution # 4 Name & Address 5. If over \$100.00 cumula Occupation Business Address	Direct PAC Receipt? ative, please pro	Employer Loan from a person YES 4. Date of the control of	f Rece	Fund Raiser	\$S_0.00	\$for Memo Itemization
5. If over \$100.00 cumula Occupation Business Address Type of Contribution: 8. Contribution # 4 Name & Address 5. If over \$100.00 cumula Occupation Business Address Type of Contribution:	Direct PAC Receipt? ative, please pro	Employer Loan from a person YES 4. Date of the control of	f Rece	Fund Raiser Fund Raiser Page Subtota	\$ Click Here \$30.00 Enter this total of line 3a of Summ	\$for Memo Itemization
5. If over \$100.00 cumula Decupation Business Address Type of Contribution: 8. Contribution # 4 Name & Address 5. If over \$100.00 cumula Occupation Business Address Type of Contribution:	Direct PAC Receipt? ative, please pro	Employer Loan from a person YES 4. Date of the control of	f Rece	Fund Raiser Fund Raiser Page Subtota	\$	\$for Memo Itemization
. If over \$100.00 cumular Decupation Business Address Type of Contribution: Contribution # 4 lame & Address 5. If over \$100.00 cumular Occupation Business Address Type of Contribution:	Direct PAC Receipt? ative, please pro	Employer Loan from a person YES 4. Date of the control of	f Rece	Fund Raiser Fund Raiser Page Subtota	\$ Click Here \$30.00 Enter this total of line 3a of Summ	\$for Memo Itemization
Decupation	Direct PAC Receipt? ative, please pro	Employer Loan from a person YES 4. Date of the control of	f Rece	Fund Raiser Fund Raiser Page Subtota	\$ Click Here \$30.00 Enter this total of line 3a of Summ	\$for Memo Itemization